

Work Order ID 97303

February-14-13 1:44:24 PM

Push

97303

Page 1

Item ID: D3535-11

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Wearshoe

Start Date: 2/13/13 Start Qty: 8.00

8

Cust Item ID:

Required Date: 2/27/13 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals:

Process Plan:

PL

Date: *13-02-19*

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D3535

Rev B

100

0.00

100

FLOW WATER JET

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg D3535 Dwg Rev: *B* Prog Rev: *B* 2-
Deburr if necessary

8

*DAS
05
2-89*

13-03-20

110

0.00

110

QC2- Inspect parts off machine FAI/FAIB

QC

Memo

0.00

Quality Control

8

*DAS
05
2-89*

13-03-20

120

0.00

120

QC8- Inspect parts - second check

QC

Memo

0.00

Quality Control

*DAS
05
2-89*

8

15321

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data <input type="checkbox"/>										
Equip/Tooling <input type="checkbox"/>										
Operator <input type="checkbox"/>										
Material <input type="checkbox"/>										
Setup <input type="checkbox"/>										
Other <input type="checkbox"/>										
Process <input type="checkbox"/>										
Supplier <input type="checkbox"/>										
Training <input type="checkbox"/>										
Unapproved <input type="checkbox"/>										

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

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Page 2

Item ID: D3535-11

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Setup Start ***NS1***

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Stop ***NS2***

Item Name: Wearshoe

Start Date: 2/13/13 Start Qty: 8.00

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Cust Item ID:

Required Date: 2/27/13 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

130

Brake NC

NC BRAKE

0.00

0.00

8

SB
13/03/21

Memo

1-Form on Brake as per Dwg D3535 using Jigs DT8261 and DT83262-Form
joggle as per Dwg D3535 using Jig DT8158 Identify as D3535-11

140

140

QC

QC5- Inspect part completeness to step on W/O

0.00

0.00

8

SmB
13.3 21

Memo

Quality Control

150

150

Powdercoat

Grey Sandtex(Ref:4.3.5.6) per QSI005 4.3

0.00

0.00

Memo

START TIME: 3:45 OVEN TEMPERATURE:

FINISH TIME:

32001

4:15

8x8 m/ 13/03/21

M122966

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 97303

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Page 3

Item ID: D3535-11

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Revision ID:

Stop ***NS2***

Item Name: Wearshoe

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8

Cust Item ID:

Required Date: 2/27/13 Req'd Qty: 8.00

8

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

QC3- Inspect Part Finish

0.00

160

QC

Memo

0.00

Quality Control

8x d MU 13/02/22

170

Identify as per dwg & Stock Location: FP-002 0.00

170

Packaging

Memo

0.00

Packaging

8x d MU 13/03/02

180

QC21- Final Inspection - Work Order Release

0.00

180

QC

Memo

0.00

Quality Control

13/3/25 JF
ME
13-3-25

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY										
Landing Gear			General							
<input type="checkbox"/> Bending	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Cracks	<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Wave/Twist in Tube
<input type="checkbox"/> Bend	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Burrs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Countersink	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Drawing	<input type="checkbox"/> Finish	<input type="checkbox"/> Folio
<input type="checkbox"/> Grain	<input type="checkbox"/> Hardware	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Misread	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Weld	<input type="checkbox"/> Wrong Stock Pulled
<input type="checkbox"/> Other										

Picklist Print

February-14-13 10:56:20 AM

Page 1

Work Order ID: 97303

Parent Item: D3535-11

Parent Item Name: Wearshoe

Start Date: 2/13/13

Required Date: 2/27/13

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP Rev:A New Issue 07-02-15 JLM
IPP Rev:B As per Rev B 07-08-31 JLM Verified By:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304S20GA 304/316 .040 Sheet		Purchased	No			100	sf	327.7001	0.7015	5.9073688		2/13/13	

Location

Loc Qty

Loc Code

MAT020

327.700065

121380

0.000065

122732

32

122753

98.8

124029

196.9

R#124956

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

DART AEROSPACE LTD		Work Order:	97303
Description: Wearshoe		Part Number:	D3535-11
Inspection Dwg: D3535 Rev: B		Page 1 of 1	

FIRST ARTICLE INSPECTION CHECKLIST

☒ First Article ☐ Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
5.00	+/-0.010	5.00	✓		T	MM-02
8.00	+/-0.010	8.00	✓		T	
14.00	+/-0.010	14.00	✓		T	
21.150	+/-0.010	21.150	✓		T	
26.650	+/-0.010	26.650	✓		T	
5.650	+/-0.010	5.650	✓		T	
Ø0.188	+0.005/-0.001	0.181	✓		✓	MM-01
0.300	+/-0.010	0.305	✓		✓	
0.300	+/-0.010	0.306	✓		✓	
0.038	+/-0.010	0.038	✓		✓	

Measured by:	<i>[Signature]</i>	Audited by:	<i>[Signature]</i>	Prototype Approval:	N/A
Date:	13-03-20	Date:	13/3/21	Date:	N/A

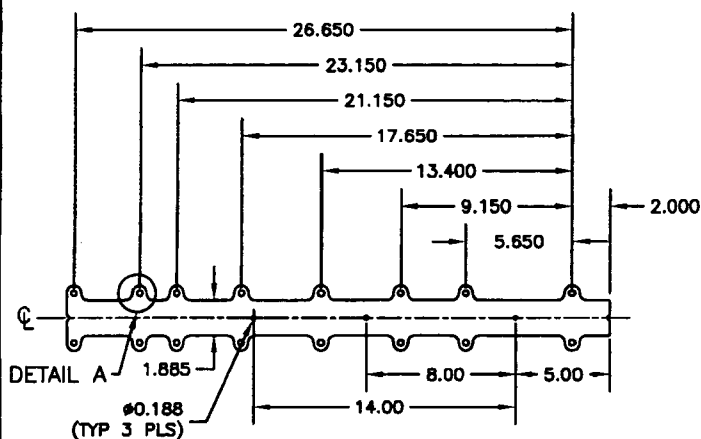
Rev	Date	Change	Revised by	Approved
A	09.05.07	New Issue	KJ/DD <i>[Signature]</i>	<i>[Signature]</i>

DART

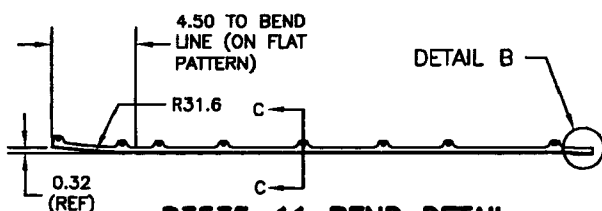
RELEASED

07.04.24

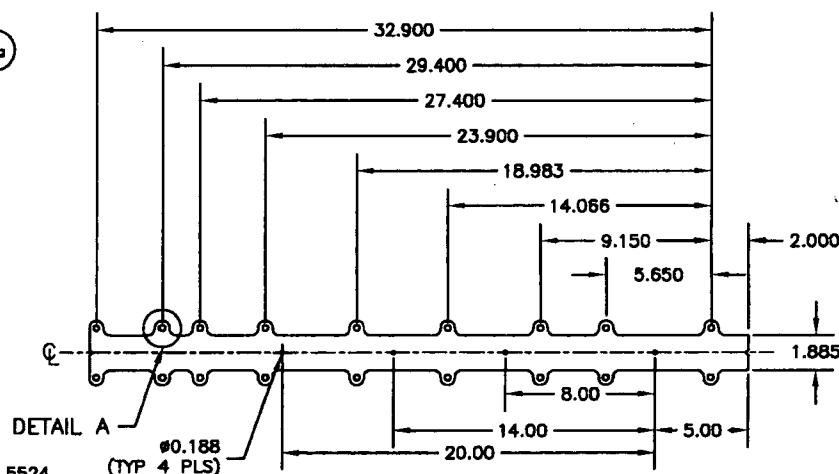
91303
P13-02-19



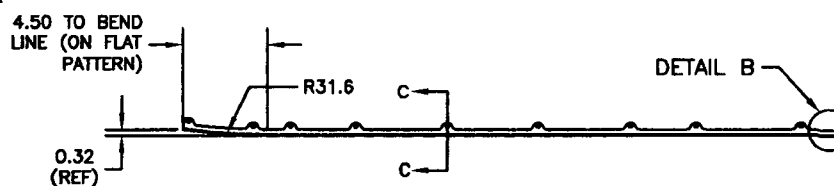
D3535-11F FLAT PATTERN



D3535-11 BEND DETAIL



D3535-13F FLAT PATTERN



D3535-13 BEND DETAIL

NOTES

- 1) MATERIAL: AISI 304/316 SS SHEET PER AMS 5513 OR AMS 5524, 20 GAUGE (0.038 THICK) (REF DART SPEC M304S20GA)
- 2) FINISH: POWDER COAT GREY SANDTEX (4.3.5.6) PER QSI 005 4.3
- 3) PART IS SYMMETRICAL ABOUT C
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES
- 6) BREAK ALL SHARP EDGES TO 0.010 MAX
- 7) IDENTIFY WITH DART P/N USING WHITE FINE POINT PAINT MARKER
- 8) SEE PAGE 7 FOR DETAILS AND SECTION

DESIGN	DRAWN BY	DART AEROSPACE USA, INC.		
CB	PH	PORT HADLOCK, WA		
CHECKED	APPROVED	DRAWING NO.	REV. B	
		D3535	SHEET 1 OF 7	
DATE		TITLE	SCALE	
07.04.17		WEARSHOE	1:10	
A	06.10.25	NEW ISSUE		
B	07.04.17	MOVE TAB OUTBOARD, ADD AMS SPEC		